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		100	#HOOOAN & B∕	Alice Vanicek		(Depositor's name)
		Ke	C = ~ 7 (815)	alie Vanicek		(Signature)
				December	7, 2007	(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/671,893 09/26/2003			Michael J. Tessmer 5035.143 8000			
TITLE OF INVENTION: PRESSURIZED WATER-SOLUBLE POUCH						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE
	YES	\$720	\$0	\$0	\$720	01/15/2008
nonprovisional			1	\$0	\$720	01/13/2008
EXAMINER A		ART UNIT	CLASS-SUBCLASS			
MOHANDE		3728	206-524700			
1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys 1 Quarles & Brady LLP						
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			or agents OR, alternatively,			
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)						
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
Gowan Milling Company, L.L.C. Yuma, Arizona						
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🖾 Corporation or other private group entity 🗀 Government						
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed.						
☐ Publication Fee (No small entity discount permitted) ☐ Payment by credit card. Form PTO-2038 is attached.						
Advance Order - # of Copies 5 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 17-0055 (enclose an extra copy of this form).						
5. Change in Entity Status (from status indicated above)						
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. XX b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).						
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in nterest as shown by the records of the United States Patent and Trademark Office.						
Authorized Signature	MU			Date <u>De</u>	cember 7, 2007	
Typed or printed name	Gavin J. N	Milczarek-Desa	<u>i</u>	Registration N	o. <u>45,801</u>	
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